PAYROLL DEDUCTION CUSTOMER INFORMATION FORM

IMPORTANT: The information requested on this form is a regulatory (SEC/NASD) requirement to be acquired and maintained by SMITH HAYES Financial Services Corporation. It is considered private and confidential.

Shareholder Name		Social Security Number
Co-shareholder		
Address		/
		Date of Birth
City ()		(If custodial account, date of birth and social security number of the minor.)
Type of Account(s)	stment Roth IRA Both	,
☐ Single ☐ Divorced ☐ Widowed	☐ Married Name of Spouse	
	Position F	
Type of Business How Long Employed		
Spouse's EmployerPosition Held		Held
Investment Objectives	Annual Income	Net Worth
(check or rank)	(from all sources)	(excluding residence)
A - Conservative income/ safety of principal	A - under \$75,000 B - \$75,000 - \$150,000	A - under \$250,000 B - \$250,000 - \$500,000
B - Conservative appreciation/	C - \$150,000 - \$250,000	C - \$500,000 - \$1,000,000
long term growth C - Aggressive income	D - \$250,000 - \$500,000 E - \$500,000 +	D - \$1,000,000 - \$5,000,000
D - Aggressive appreciation	E - \$500,000 +	E - Over \$5,000,000
Federal Tax Bracket		
□ 15% or less □ 28% or less □ 31% or less □ 36% or less Other		
Inve	estment Experience years	
AMCAD Fund	Incomo	Fund of America
AMCAP FundIncome Fund of America CheckAmerican Balanced FundIntermediate Bond Fund		
the fundsAmerican Mutual FundInvestment Company of America		
selected:American High Income TrustLimited Term Tax-Exempt Bond FundNew Economy Fund		*
Rincreal Mutual PulidNew Economy PulidNew Perspective Fund		
Capital Income BuilderSMALLCAP World Fund		
Capital World Growth & IncomeTax-Exempt Bond Fund of AmericaTax-Exempt Money Fund of America		
		vernment Securities Fund
Fundamental Inves	torsU.S. Tre	easury Money Fund of America
Growth Fund of A	mericaWashin	gton Mutual Investors Fund
Employee Signature		Date
Registered Representative	-	Principal





MEMBER National Association of Securities Dealers, Inc.